5. Providing alternative anti-malarials in Chloroquine resistant areas.

6. Vector control measures have been intensified by prioritization of areas for selective spray with appropriate insecticides and alternative vector control methods.

7. Newer and more effective alternative insecticides like Synthetic Pyrethroids have been introduced in the programme.

8. Information education and Communication (IEC) activities for public awareness have been intensified.

9. Capabilities for Epidemic preparedness and rapid response are being strengthened.

Central assistance for upgradation of PHCs

4857. DR. DASARI NARAYANA RAO: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Central assistance is provided to States for upgradation of primary health centers;

(b) if so, the details thereof;

(c) the assistance provided to Andhra Pradesh during the last three years, year-wise and number of PHCs upgraded during the said period; and

(d) if answer to part (a) be in the negative, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) and (b) Health is primarily a State subject. However, Government is helping the State Governments to upgrade the facilities in Primary Health Care Institutions in the country.

States are provided funds in the form of Additional Central Assistance under the Pradhan Mantri Gramodaya Yojana (PMGY) for Primary Health Sector which is to be utilized for strengthening, repair and maintenance of infrastructure in sub-centres, primary health Centres and community health centres.

Under the **Reproductive and Child Health Programme,** the following steps are being taken to upgrade the primary health services in the country.

- Major Civil Works are sanctioned for the repair/construction of Operation Theatre/Labour Room.

- Provision of equipments/medicine for emergency, obstetrics at selected first referral units.
- Financial assistance for making contractual appointments/hiring of Anaesthetists/gynaecologists/Safe Motherhood consultants/Staff Nurses/ Lab. Technician/Additional Auxillary Nurse Midwives (ANM) etc.
- Skill based in-service training for capacity building of Doctors, ANMs and other health functionaries.

Under the **State Health System Projects,** the Community Health Centres and District Hospital are being upgraded and better equipped so that quality of care in the provisioning of health services to people in rural and backward areas, receives a thrust.

Area Development Projects are also being implemented with financial assistance from external agencies for strengthening of health and family welfare infrastructure. One of the main activities of Area Projects includes construction of buildings for sub-centres, primary health centres and community health centres.

Government of India has advised the State Governments, to establish Community Health Centres/Hospitals by upgrading 25% of Primary health Centres. While selecting the location of the upgraded PHC/CHC only those areas are to be selected which have no referral facilities within reasonable distance. Preference should be given to the areas located farthest from the district headquarters and backward hilly and tribal areas.

(c) and (d) The funds provided to the State Government, for the purpose under the Primary Health Component of Pradhan Mantri Gramodaya Yojana and Major Civil Works under RCH Programme during last three years, are as under:—

(Rs. in lakh)

Year	PGMY (Primary Health)	RCH (Civil Works)
1999-2000	—	562
2000-2001	2841.90	—
2001-2002	2841.00	—

One CHC should cover 4 Primary health Centres, should have 30 beds, trained and qualified specialists in medicine, surgery, pediatrics, gynae and obstetrics and public health. As the establishing of CHCs comes under the purview of concerned State Governments the above criteria have not been followed strictly. As a result most of the CHCs have been established *denovo* rather than through upgradation. 12 CHCs were established in Andhra Pradesh in 1998-99 and no CHC was established in the State since then, as per information available with the Ministry.

ECT for mental patients

4858 PROF. M. SANKARALINGAM: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Electro Convulsive Therapy (ECT) or shock Therapy is beneficial for mental patients;

(b) if so, the details thereof;

(c) whether it is a fact that treatment for mental patients getting shock therapy is performed under sub-standard conditions due to lack of facilities; and

(d) if so, the steps taken to improve the facilities?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) to (d) Yes, Sir. ECT is chosen as a method of treatment for certain definite conditions such as severe depressive orders, schizophrenia and certain patients suffering from depressive disorders who do not respond to other forms of treatment such as drug treatment. In Government run mental hospitals and psychiatric units of general hospitals, ECT is given with due pre-cautions/adequate care. State Mental Health Authorities and Licensing Authorities in various States are empowered to monitor this type of treatment in licensed private psychiatric hospitals and nursing homes.

Films for creating social awareness

†4859. SHRI ANIL SHARMA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the films shown during the last three years in Himachal Pradesh, Punjab, Haryana and Uttaranchal for creating social awareness;

†Original notice of the question was received in Hindi.